OUITWORKS

Hospital and Health Center Guide

Helping you help your patients quit smoking





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The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health 250 Washington Street, Boston, MA 02108-4619

Dear Colleague:

In 2002, the Massachusetts Department of Public Health, in collaboration with all major health plans across the state, launched QuitWorks, a first-of-its kind, stop-smoking service for all Massachusetts residents, regardless of their health insurance status. QuitWorks provides free, confidential tobacco treatment counseling by telephone, and serves as a gateway to the full range of our state's evidence-based tobacco treatment programs.

Over the past several months, hospitals and health centers have increasingly expressed a need for the program. In response to these requests, we have developed this guide to help integrate QuitWorks into these settings. Initially introduced to physicians, the QuitWorks program experienced an immediate and encouraging response. In just 18 months, physicians linked more than 3,000 patients to this effective new service.

I urge you to take advantage of this free resource and join us in the fight to reduce the incidence of disease and premature death from tobacco use in the Commonwealth of Massachusetts.

Sincerely,

Christine C. Ferguson

Commissioner

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Quitworks for Hospitals and Health Centers at a Glance

The Solution to Help Patients Quit Smoking

QuitWorks is a free, evidence-based stop-smoking service developed by the Department of Public Health in collaboration with all major health plans in Massachusetts. QuitWorks links your patients who want to quit smoking to the full range of the state's tobacco treatment services. Using a simple enrollment form, any physician, nurse, or other clinician in your hospital or health center can easily and quickly enroll any patient who uses tobacco, regardless of health insurance status. A QuitWorks team will help you fit the program to your needs for inpatient or outpatient units.

"QuitWorks fills a huge gap in the continuity of care we can offer smokers. Hospitals and health centers need to provide counseling to smokers *after* they leave the health care setting. QuitWorks does this with an innovative system that reaches out to contact the patient, offers evidence-based services, and keeps the provider in the loop with patient progress reports."

-Nancy Rigotti, MD
Director, Tobacco Research and Treatment Center
Massachusetts General Hospital and Harvard Medical School
Boston, Massachusetts

What QuitWorks Offers

- The state's proven-effective stop-smoking services proactive telephone counseling, a website, self-help information, and referral to community tobacco treatment services
- A simple patient enrollment form with HIPAAcompliant patient consent approved by all major commercial and Medicaid health plans
- Patient status reports to referring providers—the provider you choose will receive faxed information on the services each patient selects and, six months later, a report on each patient's quit status
- Training for your nurses, physicians, and other clinicians—delivered on site by the University of Massachusetts Medical School to introduce your staff to QuitWorks, brief patient motivational interviewing, and the latest pharmacotherapy dosing guidelines*
- Reports on patient outcomes—aggregate reports customized to satisfy JCAHO core measures and other reporting and research needs*
 - * At a minimal charge to cover costs



What You Do— In Five Easy Steps

- Set up a system to identify tobacco use by patients upon admission, during outpatient visit, during hospital stay, or prior to discharge.
- 2. Talk with patients about tobacco use during hospital stay or outpatient visit, or prior to discharge, and give the patient a "Think About It" pamphlet.
- Complete enrollment form, give patient QuitWorks Welcome Guide, and fax enrollment form to QuitWorks toll-free line.
- Prescribe pharmacotherapy, if appropriate, for relief of withdrawal symptoms and to aid with stopping smoking.
- **5. Receive status reports,** review, and file in patient medical record.

"QuitWorks makes it easy for our busy providers to refer our patients to treatment. Having the materials in Spanish is essential for this community. Thank you, QuitWorks!"

-Mary Ioven, RN, MA Clinical Director Greater Lawrence Family Health Center Lawrence, Massachusetts

QuitWorks Takes It From There...

- Qw Calls your patient—Upon receipt of an enrollment form, QuitWorks:
 - Conducts a 10-minute telephone interview to assess readiness to quit
 - Mails a customized Quit Kit
 - Offers multiple counseling options
 - Advises your patient on course of action
- Provides intensive counseling services,
 on the phone or through referral to in-person services
 - Five proactive telephone counseling sessions
 - Referral to more than 30 community tobacco treatment centers with trained counselors
- ow Provides on-line help at www.trytostop.org
 - The QuitWizard, a self-directed counseling tool
 - Interactive bulletin board and user community
 - Expert advice and success stories
 - Access to a warehouse of materials to download to help the patient
- **Paxes report to referring provider** several days after receiving enrollment form to confirm patient contact and indicate services selected
- ow Sends a six-month patient quit status report to the provider identified on the enrollment form; aggregate reports may be customized for your hospital or health center, if desired

Getting Started With QuitWorks

Your Plan for Identifying Smokers and Enrolling Patients in QuitWorks

Think about integrating QuitWorks in outpatient and inpatient units.

Use the Guide below to answer key questions, such as:

- How will smokers be identified and smoking status documented?
- Who will provide advice to quit and recommend pharmacotherapy?
- Who will complete the QuitWorks enrollment form and obtain patient consent?
- Who will fax the enrollment form?

Consider how QuitWorks will fit into admission forms, medical records, pharmacy, or standing orders at discharge.

Think about key players.

Bring together a core group of staff, including natural "champions" from among executive and medical staff, quality assurance specialists, nurse administrators, specialists, and unit directors.

Think about how and when to introduce QuitWorks.

Will you launch QuitWorks in pilot units, and, if so, which units? Which units see the most smokers? Will QuitWorks be rolled out institution-wide?

QuitWorks Implementation Guide for Hospitals and Health Centers

| WHAT | WHEN (Suggested Opportunities) | HOW (Suggested Methods) | WHO (Person or Position) |
|--|--|---|--|
| Identify Smoker and Document Smoking Status | Typically at admission or soon after and at every outpatient visit Other options: During hospital stay or prior to discharge | Nursing or other assessment form Questionnaire/Survey Vital signs stamp or sticker Document in medical record for JCAHO or quality improvement purposes | Typically, nurse at admission or administrative personnel |
| 2. Talk with Patient about Tobacco Use Advise patient to quit Assess patient's readiness to quit Ask if patients would like to be enrolled in a free program to help them quit Discuss/Offer pharmacotherapy | At admission, during hospital stay or outpatient visit, or at discharge Use multiple interventions, if possible | Give patient QuitWorks "Think About It" brochure | Nurse, physician, or other clinician |
| 3. Complete Enrollment Form Include provider information Obtain patient signatures Fax enrollment form to 1-866-560-9113 with "call-after date" noted Document that form was faxed and file in patient's medical record | During hospital stay or outpatient visit or prior to discharge | Give patient QuitWorks "Welcome" brochure | Nurse, physician, or other clinician |
| 4. Prescribe Pharmacotherapy (IF APPROPRIATE) • For relief of withdrawal symptoms • For stopping smoking | During hospital stay or outpatient visit, and at discharge | See back of enrollment form for dosing guide; form may be customized to indicate medications in hospital formulary | Physician |
| Receive Status Reports and Review Fax back patient status report to provider indicated on enrollment form Send optional aggregate reports to hospital or health center | Post discharge | File any status reports sent to the hospital in patient medical record Compile data for JCAHO and quality improvement reports | PCP, referring provider, or other designated personnel Quality assurance manager |

Getting Started With QuitWorks

The QuitWorks Team Will Help Every Step of the Way

To get you started, a QuitWorks team from the Massachusetts Department of Public Health, the University of Massachusetts Medical School, and the Try-To-STOP TOBACCO Resource Center is ready to help.

Call Us!

For more information or to schedule a meeting, please email Donna Warner, QuitWorks Project Director, Massachusetts Department of Public Health at donna.warner@state.ma.us or Beth Ewy, University of Massachusetts Medical School at beth.ewy@umassmed.edu. You may also visit www.quitworks.org or www.trytostop.org to preview our smoking cessation resources.

Schedule the QuitWorks Team to give a presentation at your facility.

The QuitWorks Team will come to you and lead a one-hour presentation and discussion with your staff on the QuitWorks program and how to customize it for your facility. There is no cost for this session, and it may qualify for continuing education units.

Think about customized QuitWorks features.

For all participating hospitals and health centers, we design a customized enrollment form, free of charge, to help us track enrollment from your institution and prepare reports for you. We will put your hospital name and logo on the form and highlight the smoking cessation medications available in your formulary. Some institutions also need additional patient consent language. We can help you with this too, and we can provide examples from other hospitals.

Other customized features are available at a small charge to cover costs:

- Aggregate data reporting on smokers you enroll in QuitWorks, services they receive, and quit status at six-months post-treatment
- Training offered by the University of Massachusetts Medical School for your staff on QuitWorks, on how to talk with smokers, and on smoking cessation medications

THINK ABOUT MEASURING SUCCESS!

- Develop a plan to track who uses QuitWorks in your hospital.
- Use QuitWorks reports to track patient enrollments and patient outcomes by unit within your hospital.
- Use QuitWorks reports to satisfy JCAHO and institutional performance monitoring.
- Let us know how you're doing.

"The QuitWorks team's proactive assistance in supporting our hospital-wide tobacco cessation initiative was invaluable. They provided training and educational materials, and customized the QuitWorks enrollment form to suit our institution's needs."

Amy Simon, MD and Catherine Milch, MD Co-Chairs, Tobacco Cessation Initiative Tufts-New England Medical Center Boston, Massachusetts

You have questions, the QuitWorks team has answers...

Frequently Asked Questions

Q: Can anyone enroll in QuitWorks?

A: QuitWorks is open to all Massachusetts residents, regardless of health insurance status.

Is there any cost to the patient or the hospital/health center for QuitWorks services?

A: There is no cost to the patient, the referring provider, or the hospital/health center for basic QuitWorks services and materials (fax enrollment, patient counseling services and education materials, patient status reports, and customized QuitWorks enrollment forms). The QuitWorks team will meet with your staff free of charge. However, there is a charge to cover costs for aggregate reports and for training of hospital or health center personnel.

Is the patient enrollment procedure time consuming?

A: No, all you have to do is complete a simple form and fax it to QuitWorks. The form has been endorsed by all major health plans.

O How will I know how the patient is doing in his/her efforts to quit tobacco use once enrolled in QuitWorks?

A: QuitWorks will send status reports to the referring clinician, primary care provider, or clinical specialist indicated on the enrollment form. Providers receive two faxes—one within several days of receiving an enrollment form to confirm patient contact and report cessation services selected by the patient, and another at six months to report the patient's quit attempts and quit status.

If a patient returns to the hospital or health center at a later date and reveals that he/she has started smoking again but wants to stop, can that patient be re-enrolled in the QuitWorks program?

A: Yes, it often takes many attempts to quit smoking. Patients may enroll as many times as they need in order to achieve success.

Q Can adolescents benefit from enrollment in the program or is it specifically designed for adults?

A: QuitWorks is for all ages, but parental consent is needed for youth under 18 years of age to be enrolled in the program. However, adolescents may call 1-800 TRYTOSTOP or go online at www.trytostop.org without parental consent.

What kind of assistance will QuitWorks provide in developing a plan and setting up a system for our hospital or health center?

A: The QuitWorks team will help from the start, guiding and advising as you put QuitWorks in place. QuitWorks also provides on-site training for your staff and all the materials you will need to implement the program successfully.

Enroll Your Patients: Three Easy Steps

| | Patient stamp, label, or info. (name, record number/DOB, date) -NSMC NORTH SHORE MEDICAL CENTER | Customize the Form • Add hospital name and logo |
|------------------------------|--|---|
| 1. | ASSESS readiness to quit: ASSIST smoker to quit: Brief counseling Reasons to quit Barriers to quitting Medications if appropriate Stop-smoking advice given: "1 strongly advise you to quit smoking and I can help you." Not ready to quit Not ready to quit Lessors from past quit attempts Set a quit date, if ready Enlist social support | Helpful Reminders • Talking with your patients |
| Provider Information | Nicotine Replacement (CIRCLE): patch garn loange inhalar nasal spray Other (CIRCLE): Bupropion (Zybarn/Wellfutrin SR) ARRANGE follow-up: | Advising on pharmacotherapy |
| 2. Patient Information | PATIENT first name last name date of birth (month/day/year) | FDA Medications |
| 3. Patient Consent | Nerwork Health Turis Health Plan Other The Resource Center usually calls the patient within three business days of receiving a referral. When should we call? circle all that apply: morning afternoon evening 1, | Dosing Guide cotherapy In Tobacco Treatment Treatment Duration: 8 wks. |
| | contact me upon receiving this referral from NSMC. SIGNATURE OF THE PATIENT OR PATIENT'S REPRESENTATIVE PRINTED NAME OF PATIENT REPRESENTATIVE PRINTED NAME OF PATIENT REPRESENTATIVE Story Story The patient of t | |
| | NASAL SPRAY Nicotrol® NS Initial: 1-2 doses/hr. 10 mg/ml MAX: 5 doses/hr. or 40 doses/day INHALER Nicotrol® Inhaler Initial: 6-16 cartridges/day 10 mg/cartridge MAX: 16 cartridges/day NON-NICOTINE MEDICATION BUPROPION HCL SR * Zyban® Initial: 150 mg/day (days 1-3) 150 mg tables MAX: 300 mg/day (days 4-3) 150 mg tables included of this shall dosage that its richt ly felt more incentions. The chart dise rol any of these medicalitors for instance benth librarious to of these medicalitors is rot included as any part of the Flys-16 STOP 108ACO Resour * NORMALLY AVAILABLE FROM HOSSITAL HERMANCY Make smoking hist Make smoking hist | Lindicate or authorize insurance benefit coverage for contact hisher insured directly The cost or provision roe Center of Massachusetts or OuttWorks program. |

QuitWorks Counseling Overview

The Try-To-STOP TOBACCO Resource Center*, funded by the Massachusetts Department of Public Health, provides QuitWorks counseling services to all state residents. For patients who have quit or who are ready to take action by choosing a quit date in the near future, QuitWorks offers proactive telephone counseling or referral to local tobacco treatment services. QuitWorks uses the American Cancer Society's Quitline to provide the multisession, telephone counseling, as outlined below by the American Cancer Society.

| SESSION | SCHEDULE | OBJECTIVES |
|---------|--|---|
| 1 | Immediately following intake call to 1–7 days after, scheduled per caller convenience | Establish rapport • Determine reasons for smoking, reasons for quitting, and concerns about quitting • Discuss nicotine addiction • Answer questions, concerns regarding quit date |
| 2 | OPTIMAL 2 days before quit date RANGE 1–3 days before quit date | Aid caller in preparation for quit day • Assess status of stop-smoking medications and discuss further if needed • Discuss and practice thought and action strategies |
| 3 | OPTIMAL 1 day after quit date RANGE 1-2 days after quit date | Assess quit status and emotional state • Conduct appropriate session based upon caller's quit status • Assess caller's use of quit strategies and stop-smoking medications • Plan for handling future tough situations that will come up in the next week |
| 4 | OPTIMAL 7 days after Session 3 RANGE 5–9 days after Session 3 | Assess quit status, emotional state, and use of stop-smoking medications • Assess caller's motivation to remain a non-smoker • Plan for handling future tough situations that will come up in the next week • Reinforce caller for their success |
| 5 | OPTIMAL 14 days after Session 3 RANGE 12–16 days after Session 3 | Assess quit status, emotional state, and use of stop-smoking medications • Assess caller's motivation to remain a non-smoker • Remind caller to prepare to cope with urges to smoke in advance; plan for action and thought strategies, and do mental rehearsals of them • Reinforce caller for their success |

^{*} See page 9 for a list of all services.

The Evidence Base for OuitWorks

Clinical trials clearly demonstrate that brief smoking cessation counseling by physicians, dentists, and other clinicians significantly increases smoking cessation rates in adult patients. Utilizing evidence determined from these trials, the U.S. Public Health Service published in 2000 a clinical practice guideline for treating nicotine dependence. Known as the **5 A's Intervention**, these guidelines recommend that the clinician:

- **ASK** about tobacco use at each visit
- ADVISE all tobacco users to stop
- **ASSESS** desire and willingness to quit
- **ASSIST** patients in quitting
- ARRANGE follow-up to support and reinforce patient efforts

The evidence supporting the guideline showed that brief physician advice to quit improved patient cessation rates and the addition of brief counseling (under three minutes) increased the cessation rates even more. Behavioral counseling (including telephone-based services) and pharmacotherapy (nicotine gum, patch, nasal spray, lozenge and inhaler) or the antidepressant bupropion (Zyban® or Wellbutrin SR®) were found to be effective. A combination of counseling and pharmacotherapy produced the best results.

Physician or clinician advice based on health issues provides a strong incentive for smokers to quit and to continue their efforts to avoid tobacco. QuitWorks reinforces and enhances clinician efforts and supports successful quit attempts.

Proactive Telephone Counseling Works: The Public Health Service Clinical Practice Guideline recommends proactive telephone counseling, as treatments involving person-to-person contact (individual, group, or proactive telephone counseling) are consistently effective.

Try-To-STOP TOBACCO Resource Center of Massachusetts

FUNDED BY the Massachusetts Department of Public Health, the Try-To-STOP TOBACCO Resource Center of Massachusetts is the service provider for QuitWorks. Its four interrelated services—the toll-free tobacco helpline, the two websites, www.trytostop.org and www.quitworks.org, and the Massachusetts Tobacco Education Clearinghouse—offer cessation support to Massachusetts smokers and information and tobacco education resources to the public, tobacco control professionals, health care providers, and educators.

1-800-TRY-TO-STOP Toll-Free Tobacco Helpline

- Information on tobacco, referrals to local tobacco treatment programs, and free telephone tobacco counseling
- Quit Tips available 24 hours a day
- Services in English and Spanish (1-800-8-DÉJALO) with translators in additional languages; recorded Quit Tips in English and Spanish (1-800-9-GET-A-TIP)
- TTY line-1-800-TDD-1477 (1-800-833-1477)

Massachusetts Tobacco Education Clearinghouse (MTEC)

- Tobacco educational materials offered at low cost to tobacco control programs and health care providers in Massachusetts
- Resource library of more than 3,000 books, reports, curricula, and videos open to the public for research purposes

www.trytostop.org

- Website providing tobacco information, guitting assistance, and links
- The Quit Wizard—a state-of-the-art, self-paced, user-friendly, interactive program for tobacco users who want to quit smoking
- On-line community, bulletin boards, success stories, and ask-the-expert features

www.quitworks.org

- Website for the QuitWorks program, providing information on the program and the QuitWorks collaboration
- QuitWorks enrollment forms, patient materials, provider and office practice guides, and re-order instructions available on-line





To Get Started with QuitWorks, Contact:

- Donna Warner, QuitWorks Project Director, Massachusetts Department of Public Health at donna.warner@state.ma.us or
- Beth Ewy, University of Massachusetts Medical School at beth.ewy@umassmed.edu

QuitWorks is a collaboration of the Massachusetts Department of Public Health with major Massachusetts health plans. The QuitWorks Guide for Hospitals and Health Centers was developed by the QuitWorks Institutional Task Group.

Institutional Task Group Members:

- Massachusetts Department of Public Health
- University of Massachusetts Medical School
- Massachusetts General Hospital, Tobacco Research and Treatment Center
- Try-To-STOP TOBACCO Resource Center (JSI Research and Training Institute, Inc.)
- Boston Medical Center's HealthNet Plan

